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CONFIRMATION NO. 2937

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| SERIAL NUMBER 10/781,507 | FILING OR 371(c) DATE 02/18/2004 RULE | CLASS 606 | GROUP ART UNIT 3733 | ATTORNEY DOCKET NO. 532/3X8 |
|------------------------------------|---|---------------------|-------------------------------|---------------------------------------|

APPLICANTS
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**** CONTINUING DATA ******* *OK FCC*
 This application is a CON of 10/688,632 10/17/2003 PAT 6,896,676 which is a CIP of 10/382,702 03/06/2003 PAT 6,908,484

**** FOREIGN APPLICATIONS ******* *None FCC*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
**** 05/12/2004**

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|---|---|--------------------------------------|---------------------------|--------------------------------|
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no | STATE OR COUNTRY NJ | SHEETS DRAWING 16 | TOTAL CLAIMS 18 | INDEPENDENT CLAIMS 2 |
| 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance | EXAMINER'S SIGNATURE <i>[Signature]</i> | INITIALS <i>[Initials]</i> | | |

ADDRESS
27538

TITLE
Instrumentation and methods for use in implanting a cervical disc replacement device

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| FILING FEE RECEIVED 385 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit |
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